

<b>Case Number:</b>	CM13-0028310		
<b>Date Assigned:</b>	11/27/2013	<b>Date of Injury:</b>	08/16/2009
<b>Decision Date:</b>	01/22/2014	<b>UR Denial Date:</b>	09/20/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	09/23/2013

### HOW THE IMR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services sent the complete case file to a physician reviewer. He/she has no affiliation with the employer, employee, providers or the claims administrator. The physician reviewer is Board Certified in Physical Medicine & Rehabilitation, has a subspecialty in Interventional Spine and is licensed to practice in California. He/she has been in active clinical practice for more than five years and is currently working at least 24 hours a week in active practice. The physician reviewer was selected based on his/her clinical experience, education, background, and expertise in the same or similar specialties that evaluate and/or treat the medical condition and disputed items/services. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

### CLINICAL CASE SUMMARY

The expert reviewer developed the following clinical case summary based on a review of the case file, including all medical records:

This is a 50 year-old male with injury date from 8/16/09 with the diagnoses of knee osteoarthritis, lumbar failed surgery syndrome, chronic pain, documented on the 8/28/13 report by [REDACTED]. The IMR application shows a dispute with the 9/20/13 UR decision to deny continuing aquatic therapy.

### IMR ISSUES, DECISIONS AND RATIONALES

The Final Determination was based on decisions for the disputed items/services set forth below:

**Continued aquatic therapy (8 sessions):** Upheld

**Claims Administrator guideline:** The Claims Administrator did not cite any medical evidence for its decision.

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Treatment Guidelines Physical Medicine, and Aquatic Therapy Page(s): 98-99, 22.

**Decision rationale:** MTUS recommends aquatic therapy as an option for land-based physical therapy (PT) in patients that could benefit from decreased weight-bearing. MTUS refers readers to the Physical Medicine section for the recommendations on the number of sessions. The MTUS physical medicine section states that 8-10 sessions of PT are indicated for various myalgias and neuralgias. The 9/3/13 progress note states the patient just completed 4 weeks of

aquatic therapy and it improved his pain and functional improvement. There was no discussion of what functional improvement was seen with aquatic therapy, and no discussion of how much or for how long the pain improved. The request for an additional 8 sessions of aquatic therapy when combined with the previous 4-weeks of aquatic therapy will exceed the MTUS recommendations. The request is not in accordance with MTUS guidelines.